Divisions Affected – ALL

OXFORDSHIRE HEALTH AND WELLBEING BOARD 29th JUNE 2023

Community Profiles for Barton, Banbury Neithrop and Ruscote, Banbury Grimsbury and Rose Hill

Report by Ansaf Azhar – Director of Public Health and Community Safety, Oxfordshire County Council

RECOMMENDATION

1. The Oxfordshire Health and Wellbeing Board is RECOMMENDED to

- 1.1 Note the findings and rich insight contained within the Phase 2 Community Profiles for Barton, Banbury Neithrop and Ruscote, Banbury Grimsbury and Rose Hill.
- 1.2 Support the promotion and sharing of the community profiles with partners and colleagues across the system.
- 1.3 Use the insight from the community profiles to inform service delivery plans of partner organisations on the Board.

Executive Summary

- 2. The <u>Director of Public Health Annual Report</u> highlighted ten wards in Oxfordshire which have small areas (Lower Super Output Areas) that were listed in the 20% most deprived in England in the Index of Multiple Deprivation update (published November 2019) and are most likely to experience inequalities in health.
- 3. To better understand the needs and priorities of these communities, we have been working with local partners to create community profiles, providing an indepth understanding of the enablers and challengers to the health and wellbeing of communities and have now completed four profiles that cover five more areas (Phase 2 of the programme).
- 4. The <u>profiles</u> link to the Joint Strategic Needs Assessment (JSNA) and contribute to the local evidence base to inform service delivery, as well as being a resource for local communities to support their work.

5. Annex 1-4 contain direct links to the recently published Phase 2 community profile reports.

Background

- 6. The purpose of creating a community profile is to ensure we understand as fully as possible the health outcomes and factors that influence these outcomes within areas in Oxfordshire where residents are most at risk of poor health, or experience health inequalities. A proof of concept for ward profiles, focussing on the Banbury Ruscote ward was taken to the Oxfordshire Health and Wellbeing Board in June 2020. More details can be found through this link. (from page 47 onwards).
- 7. Since then, we have been working with communities to produce profiles to cover the other areas identified in the Oxfordshire <u>Director of Public Health</u> <u>Annual Report</u> which have the greatest number of small areas (Lower Super Output Areas) that were listed in the 20% most deprived in England in the Index of Multiple Deprivation update (published November 2019) and are most likely to experience inequalities in health.
- 8. The profiles map the assets in each area, capture community insight around enablers and challenges to health and wellbeing and detail a data set of indicators for each area to help inform high level recommendations. The methodology of the community insight capture and asset mapping are explained in each of the individual community insight reports.
- 9. After the proof of concept, the initial areas of focus (Phase 1) were Abingdon Caldecott and The Leys (Blackbird Leys and Northfield Brook combined) and a <u>report</u> outlining the key findings from these profiles was taken to the Oxfordshire Health and Wellbeing Board on 6th October 2022.

Phase 2 Profiles

10. Since then, four further profiles have been completed for the five areas listed below (Phase 2) which form the main focus of this report.

Banbury

- Grimsbury and Hightown
- Banbury Cross and Neithrop
- Ruscote (a refreshed profile for Ruscote from the original proof of concept -combined with the Neithrop profile)

Oxford City

- Barton
- Rose Hill

- 11. Similarly, to the Leys and Abingdon Caldecott profiles, we have taken the approach of setting up locally based steering groups to help shape the direction of the profiles along with an external organisation capturing the community insight, in all the areas except Barton. In Barton, the Community Health Development Officer, employed by Oxford City Council lead on the insight gathering. The Banbury community insight was led by Community First Oxfordshire and Rose Hill by Oxford Hub. The steering groups vary in their make up in each area but may include representatives from local community groups, health organisations, Councillors, Local Authorities etc. In these Phase 2 profiles, the relevant district or city council has been supporting with project management.
- 12. As noted in the community profile reports, there are limitations to the data, and although the numbers of participants means that insight is not representative of all residents in those areas, they provide valuable insight by enabling the community's voices to be heard.
- 13. The profiles will help influence action for developing community assets and addressing health inequalities experienced by the residents of the profiled communities. A series of locally led recommendations have been included in the profiles, which set out objectives to build on the assets identified in these communities, to strengthen the opportunities available for development. An action plan is in development for each area where a profile has been produced, based on each profile's recommendations.

Key Findings from Phase 2 Profiles

14. A summary of the findings, recommendations and next steps have been detailed for each area in the table below.

Banbury	Selection of key findings	
Grimsbury	Findings and recommendations for the three areas overlapped and	
and	are summarised below.	
Banbury Ruscote and Neithrop	 Green spaces and parks were highly valued assets and the proximity to the town centre and shops and services was frequently mentioned although issues with accessing healthcare was reported as causing some anxiety. Locally available activities and the community venues where these are held are highly valued Local community networks are well developed and there is a sense of a commitment to improvement across the long term although gaps were found in the lack of awareness in the wider community about what is available locally Mental health was raised as a common concern with the pandemic being reported as having contributed negatively to this as well as the cost of living Locally based groups and organisations are struggling with resourcing, funding, and a lack of volunteers 	

	 Recommendations These were arranged under the following themes and a selection of recommendations are listed alongside them: Public realm – improving of lighting and the local environment Community, communication, and integration – development of a community- wide communication strategy, development of a programme of whole -community events Community action – funding and bid writing support and improved joint working, additional support for young people, community based mental health initiatives, and additional peer-to-peer support
Barton	 Next steps An action plan has been developed that is linked to the recommendations emerging from the insight The steering group are working together to take forward actions from the recommendations in the report with support from the Community Health Development Officer The community grants scheme is being set up and is likely to be based on a modified version of an existing Cherwell community grant scheme (Spark funding)
Darton	 Selection of key findings Seventy-six percent (76%) of participants felt satisfied, more than satisfied or very satisfied with their housing situation with green spaces and this was most commonly mentioned as a reason they liked living in Barton The location of Barton and its accessibility to the city and local amenities including hospitals and transport links was reported several times as highly valued by respondents Walking was the most preferred typical mode of transport followed by cars and buses Worries about safety were linked to groups congregating outside shops and respondents reported feeling more unsafe at night, while others felt that feelings of insecurity were due to perception rather than actual threat A larger proportion of respondents from Barton felt that they are part of the local community while others reported a stigma attached to living in Barton which affected their willingness to attend community events Thirty-eight percent of respondents stated feeling lonely sometimes and less than 5% reported feeling lonely all the time
	 A high proportion of respondents from both Barton and Barton Park (66% and 77%) reported feeling they have the skills and/or qualifications to find employment

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	 Over 80% of respondents reported that they consider themselves healthy and themes amongst respondents related to supporting self-care include strong social support networks and relationships, physical activity and movement and spending time outdoors in nature. 		
	Recommendations		
	A selection of the recommendations derived from the findings of the		
	community insight are below:		
	 More resourcing to support social prescribers in Barton Long term funding for community programmes that engage the community with their surrounding environment Nurturing relationships between diverse groups to address perceptions of crime 		
	 Reinstating the community newsletter Fully involve residents in programme design 		
	 Initiatives to further support active travel 		
	Next steps		
	 An action plan was developed and a multi sectoral and community workshop was held following the publication of the report to discuss how the recommendations could be taken forward. A follow up session is scheduled to assign specific tasks from the action plan to relevant parties and to plan the grant funding process 		
Rose Hill	III Selection of key findings		
	 Forty-eight percent (48%) of respondents reported being 'quite satisfied' with Rose Hill as a place to live and a further 25% reported being 'very satisfied' 		
	 The community centre was identified as a key asset although concerns were raised that cost of some activities provided there were prohibitive to residents 		
	 Residents reported challenges related to housing including poor build quality, over-crowding, low levels of ownership and difficulties consulting with housing associations and property owners 		
	 Insight gathering suggested that some residents may 		
	experience challenges around self- motivation and		
	aspirations which can become a barrier to accessing jobs or education		
	 The cost of living was a major concern for residents cited as a barrier impacting housing, exercise, healthy eating, travel, and access to local facilities. 		
	 Most respondents reported feeling 'very' or 'quite safe' in Rose Hill and those that did not cited poor lighting and fast- moving traffic as reasons for this. 		
	 Forty-six percent (46%) of respondents reported feeling they had good health. Among the barriers to good health reported 		

were workload, cost, childcare or a long-term condition. Also reported were challenges faced in accessing healthcare service due to a lack of provision in the area
ommendations
emerging recommendations are grouped into themes with a tion of these shown below
Quick wins – brightening up of the oval with a gardening project, establishing a health walk for Rose Hill, strengthening the Rose Hill News
Longer term – Improving access and uptake of education and training opportunities, improving residents access to healthcare including mental health support, mentoring schemes to change perceptions of Rose Hill, community ownership of initiatives taken forward from the community insight
steps
An action plan has been developed and a panel consisting of a selection of members of the community as well as existing members of the steering group is being established to look at developing a grant process for the distribution of small grants to take forward actions from the recommendations

Grant Funding and Next Steps

Grant Funding

- 15. As well as the anticipated longer term strategic action arising from the profiles, it will be important that communities also see some more immediate action. To follow on from each profile a grant fund of £25,000 has been allocated for each area and a process has/will be agreed with each of the steering groups in profiled areas, for how best to utilise the money to fund local community projects, that help meet the recommendations set out in the profiles. The grants will be disbursed by an external organisation with oversight from Public Health. Outcomes and monitoring data will be reported back to the steering groups from the organisations receiving the grant funding. Any funding not spent in the 2023-24 financial year may be carried over into 2024-25.
- 16. In the case of Phase 1, Abingdon Caldecott and The Leys, which are the areas most advanced, we have taken two different approaches to the disbursement of grants.
- 17. **Abingdon Caldecott** Community First Oxfordshire (CFO) are holding the grant funds and are working closely with members of the community profile steering group to co-produce the grant scheme. CFO will provide support to applicants, undertake governance checks, and will then present eligible

applications to a group of selected members of the steering group who will form a panel to decide on the grant awards. CFO completed the community insight aspect of the profile in this area and so are well placed to understand how proposed projects may help meet the recommendations identified.

- 18. The Leys (Blackbird Leys and Northfield Brook) Oxford Hub completed the community insight aspect of the profile in this area and were already planning a second round of Participatory Grant Making (PGM) with some funding they had received another organisation. This provided a good opportunity for us to explore a different approach to the more traditional grant making processes. An exciting aspect of the PGM approach is that the decision-making panel is formed from local residents. This means that the community are enabled to make decisions about how funding should be used in their own area rather than council officers.
- 19. **Barton, Banbury Neithrop and Ruscote, Banbury Grimsbury and Rose Hill -** We are currently in the planning stages for how the grant scheme will work for the Phase 2 profiles. However, it is likely that a selection of members of the steering group will be part of each of the grant award assessment panels. More details are in the table below. The relevant district or city council that has been supporting with project management will lead on disbursing the grants.

Next Steps

- 20. We are progressing work for Phase 3 to complete profiles for all 10 of the areas which will include Littlemore and an area in the city centre covering parts of Osney St Thomas and Hinksey park. These are expected to be completed by 31st December 2023.
- 21. We are scoping out a Phase 4 of community profiles which take the learning from the above work but moves us beyond the 10 wards themselves to other geographical areas where health inequalities exist, including some more rural areas.

Community Health Development Officers

22. For longer term sustainability of this in-depth community work, we have been working with the city and district councils to fund a Community Health Development Officer (CHDO) programme to cover the 10 areas. Where a profile has already been produced, they will be supporting the delivery of the recommendations identified and, in the areas, where the profile is yet to be completed they are supporting with community engagement in the creation of the profile, and will then support the recommendations to be delivered once completed. All areas now have a postholder in place except Abingdon Caldecott which we anticipate will be recruited to later this year.

Corporate Policies and Priorities

23. The creation of community profiles links to the strategic priorities in the Oxfordshire County Council Corporate Plan of tackling inequalities in Oxfordshire and prioritising the health and wellbeing of residents.

Financial Implications

24. The funding for these four profiles (5 areas) in Phase 2 came from within the Public Health grant (Wider Determinants cost centre) in the 2022-23 financial year as a one-off cost. Details are shown within the table below.

£5,000 per area for community	TOTAL £25,000
insight x 5 areas	
£5,000 per area for project	TOTAL £25,000
management x 5 areas	
£25,000 per area for community	TOTAL £125,000
grants x 5 areas	
Overall Budget for Phase 2	TOTAL £175,000
profiles	

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Legal Implications

25. There are no legal implications associated with this report.

Equality & Inclusion Implications

26. These profiles seek to help to address inequalities by providing insight into communities experiencing inequality, to help inform service planning and to act as evidence for funding applications for activities in those areas.

Sustainability Implications

27. There are no sustainability implications to note with this report.

Ansaf Azhar Director of Public Health and Community Safety Oxfordshire County Council

Annex 1: Barton Community Profile

Barton Community Profile Summary of findings: Barton_CommunityProfile_Summary.pdf (oxfordshire.gov.uk)

Barton Community Insight Report: Barton_CommunityProfile_Insight.pdf (oxfordshire.gov.uk)

Data for Barton: Barton_CommunityProfile_Data.pdf (oxfordshire.gov.uk)

Annex 2: Banbury Grimsbury Community Profile Grimsbury Community Profile Summary of findings: BanburyGrimsburyandHightown_CommunityProfile_Summary.pdf (oxfordshire.gov.uk)

Banbury Grimsbury Community Insight Report: BanburyGrimsburyandHightown_CommunityProfile_Insight.pdf (oxfordshire.gov.uk)

Data for Banbury Grimsbury: BanburyGrimsburyandHightown_CommunityProfile_Data.pdf (oxfordshire.gov.uk)

Annex 3: Banbury Ruscote and Neithrop Community Profile Banbury Ruscote and Neithrop Community Profile Summary of findings:

BanburyNeithropRuscote_CommunityProfile_Summary.pdf (oxfordshire.gov.uk)

Banbury Ruscote and Neithrop Community Insight Report: BanburyRuscoteandNeithrop_CommunityProfile_Insight.pdf (oxfordshire.gov.uk)

Data for Banbury Ruscote and Neithrop: BanburyGrimsburyandHightown_CommunityProfile_Data.pdf (oxfordshire.gov.uk)

Annex 4: Rose Hill Community Profile

Rose Hill Community Profile Summary of findings: RoseHill_CommunityProfile_Summary.pdf (oxfordshire.gov.uk)

Rose Hill Community Insight Report: RoseHill_CommunityProfile_Insight.pdf (oxfordshire.gov.uk)

Data for Rose Hill: RoseHill_CommunityProfile_Data.pdf (oxfordshire.gov.uk) Contact Officers:

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